National Council for Applied Economic Research has revealed anti-poor bias in health care in the country;

(b) whether it is a fact that there is a vide-scale inter-state difference in health expanditure to the disadvantage of the poor;

(c) whether it is a fact that the lowest income group spends 24.1% of its annuals income on medical treatment as against the Highest income group which spands a meagre 3.4% as indicated by the study; and

(d) whether Government propose to draw up a comprehensive scheme to provide fine health to the low income group in the country?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) to (c) A study entitled "Human Development profile for Rural India" was conducted by the National Council of Applied Economic Research (NCAER) which has still to be published. However, NCAER has informed that the preliminary study indicates that the poor spend proportionately more on health and education then the better of people, in the sample population covered by the study.

(d) A comprehensive net work comprising 1,32,727 Sub Centres, 21,853 primary Health Centres and 2,424 Community Health Centres as on 1.4.1996 has been set up throughout the country to provide preventive, promotive and curative health care in rural areas. Secondary and Rertiary level hospitals are providing specialised health care to the Urban and Rural Population generally free of cost. Several National disease control programmes are also under implementation which are directed mainly to the poor people afflicted by diseases. like Leprosy, T.B., Malaria, Iodine deficiency disorders etc.

To augment the infrastructure and the outreach of programmes, external assistance have been availed of from the World Bank.

Formulation of Expansion and Development Programme of ISMH under CGHS

1128. SHRI MOHINDAR SINGH KALYAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government have since formulated the expansion and development programme of Indian System of Medicine and Homoepathy under CGHS by opening of two Ayurvedic and two Homoeopathic Units in Delhi in 1996-97 and to upgrade the standard of CGHS units of I.S.M. & H. by augmentation of para-medical staff in it;

(b) if so, the details thereof; and if not, the reasons therefor; and

(c) whether it is a fact that no amount have been provided by Government to CGHS, Ayurvedic and Homoeopathic System of medicine for last ten years to open its units in Delhi resulting in an obstacle to its expanision and development?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) to (c) CGHS has been giving emphasis to the development of ISM&H and opening dispensaries/units under the system based on the requirement, feasibility and availability of financial resources and manpower.

However, due to paucity of resources no new CGHS Ayurvedic and Homoeopathic dispensary could be opened during the last 10 years in Delhi.

Private Practice by CGHS Doctors

1129. SHRI MOHINDAR SINGH KALYAN: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government are aware that many doctors of CGHS, Allopathic, Homoeopathic and Ayurvedic system of treatment are doing private practice at present in Delhi and are using CGHS medicines for such practice;

(b) if so, the details thereof, system-wise;

(c) whether any complaints have been received by Government against such doctors from 1st January, 1993 to 31st December, 1996, if so, the details thereof; and

(d) the action proposed to be taken by Government against such doctors?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): (a) to (d) Complaints are looked into as and when received, and wherever necessary, action taken as per rules.

Control of AIDS, Narco-Trafficking and Drug Addiction in the North-Eastern States

1130. DR. B.B. DUTTA: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state the measures taken/proposed by Government to strengthen the institutional arrangements and programmes in some of the North-Eastern States for control of AIDS, Narco-trafficking and drug addiction?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI): A comprehensive scheme for the prevention of control of HIV/AIDS is being implemented throughout the country, including all the North-Eastern States since 23rd Sept., 1992. Under this scheme, State AIDS cells have been established in these States. In addition, 8 Surveillance Centres, 10 Sentinel Sites, 11 Zonal Blood Testing Centres, 36 Sexually Transmitted Diseases Clinics, 13 major Blood Banks, 1 Reference Centre and 30 district level Blood Banks have been set up in the North-Eastern States.

A total of 20 Drug-deaddiction centres in North-Eastern states have been provided central assistance for infrastructural development in terms of construction grant, equipment, vehicles, training of doctors and para-medical staff in Medical colleges and District level Hospitals.

Instructions have been issued by Ministry of Finance (Deptt. of Revenue), Narcotics Control Bureau to all the enforcement agencies to maintain the utmost vigil and step of enforcement efforts under the stringent provisions contained in Narcotic Drugs and Psychotropic Substances Act. Training is being imparted to officers to improve their effectiveness. Vehicles and communication equipments have been provided. Border Security Force who is developed on land borders has been vested with powers under the Customs Act to interdict narcotic drugs on the border in addition to the several Central and State Government enforcement agencies empowered under the Narcotic Drugs and Psychotropic Substances Act. Reward scheme for informers and enforcement officers is being implemented. Quarterly co-ordination meetings chaired by Director General, Narcotics Control Bureau are held regularly in New Delhi which are attended by all Enforcement agencies involved in drug law enforcement at the highest level. A regional unit of Narcotics Control Bureau was set up in Imphal. Under the North Eastern Council, Nodal Officers have been designated by the State Governments to coordinate enforcement efforts in these states. A comprehensive bilateral agreement has been entered into by the Government of India with the Government of the Union of Myanmar for reducing demand and preventing illicit trafficking in narcotic drugs. The Government of India has provided two drug sniffer dogs and also trained dog-handlers of Myanmar.

Implementation of the Recommendations of the Draft National Population Policy

1131. PROF. RAM KAPSE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether Government propose to introduce urgent steps to ensure that the population problem is tackled on a priority basis;

(b) if so, by when the recommendations of the draft National Population Policy are likely to be implemented;

(c) Whether Government are aware that any futher delay in implementing the above recommendations is going to negate the entire growth and development process; and

(d) if so, the reasons for the delay in implementing the New National Population Policy?

THE MINISTER OF STATE OF THE MINISTRY OF HEALTH & FAMILY WELFARE (SHRI SALEEM IQBAL SHERVANI) (a) to (d) The draft Statement on National Population Policy alongwith draft Note for the Cabinet has been circulated among